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VIRGINIA DEPARTMENT OF EDUCATION

Pandemic Influenza Plan Guidelines for Virginia Public Schools

These guidelines were prepared by the Virginia Department of Education (VDOE) to assist local school administrators and staff in developing pandemic influenza plans for their respective school divisions. Public health authorities conclude the probability of an influenza pandemic has increased markedly in recent years. A pandemic is a global disease outbreak. A pandemic will most likely occur in phases: interpandemic period, pandemic alert period, and pandemic period/response. Detailed information for each phase will be provided in this document.

During times of crisis, schools rely heavily on the assistance of local community responders and agencies. Relationships with these groups need to be established and cultivated long before the crisis occurs. Working with local agencies now will decrease fear, anxiety and confusion and improve the response during a crisis. The VDOE is encouraging all schools to collaborate with their local Emergency Management Coordinators, their local health officials, and other community stakeholders to create an all-hazard plan to assure a comprehensive effective response.

This guidance document includes specific considerations during each phase of a pandemic regarding expected local school division actions; VDOE activities; access control; surveillance, screening, and triage; infection control and precautions; communication and education; and school closure strategies.

General Information

Pandemic Influenza Plan Guidelines for Virginia Public Schools has been designed as a fluid document. These guidelines will be updated to incorporate the most recent information to assist schools in designing their respective plans. In order to coordinate a response, each section of the plan indicates activities that are expected at the local level. Likewise, activities school divisions can expect from VDOE are outlined.

According to the World Health Organization (WHO):

"An influenza pandemic occurs when a new influenza virus appears against which the human population has no immunity, resulting in several, simultaneous epidemics worldwide with enormous numbers of deaths and illness. With the increase in global transport and communications, as well as urbanization and overcrowded conditions, epidemics due to the new influenza virus are likely to quickly take hold around the world."

Influenza, commonly called "the flu," is caused by the influenza virus, which infects the respiratory tract (nose, throat, lungs). Influenza usually spreads from person to person when an infected person coughs, sneezes, or talks, and the virus is sent into the air. Influenza can cause illness in all ages, and it is more likely than other viral respiratory infections, such as the common cold, to cause severe illness and life-threatening complications. Annually, more than 200,000 people are hospitalized from influenza. Approximately 36,000 people die from the flu and its complications every year. Should an influenza pandemic occur, the incidence of illness and death from influenza will likely dramatically increase worldwide.

The twentieth century saw three pandemics of influenza:

- The 1918 influenza pandemic caused at least 500,000 U.S. deaths and up to 50 million deaths worldwide.
- The 1957 influenza pandemic caused at least 70,000 U.S. deaths and one to two million deaths worldwide.
- The 1968 influenza pandemic caused about 34,000 U.S. deaths and 700,000 deaths worldwide.

Public health authorities have identified characteristics and challenges unique to a pandemic such as:

- When the pandemic influenza virus emerges; its global spread is considered inevitable.
- Most people will have little or no immunity to a pandemic virus, and a significant percentage of the population will require medical care.
- Death rates will be high due to the significant number of people who become infected, the virulence of the virus, the characteristics and vulnerability of affected populations (elderly, those with chronic disease, and children), and the effectiveness of preventative measures.
- Past pandemics have spread globally in two, and sometimes three, waves.
- Medical supplies will be inadequate. Vaccine for the virus will possibly not be available for six months. The supply will be limited, availability of antiviral drugs is likely to be less than the demand, and hospital beds and other supplies will be limited.
- Pandemics also cause economic and social disruption such as school and businesses closing, travel bans, and canceling of community events.
- Care of sick family members and fear of exposure can result in significant absenteeism in the workforce.

Avian influenza, also known as bird flu, refers to a large group of different influenza viruses that primarily affect birds. Wild birds can carry the viruses, but usually do not get sick from them. However, some domesticated birds, including chickens, ducks and turkeys, can become infected, and will often die from the virus. Avian influenza (strain H5N1) was first detected in humans in 1997 in Hong Kong, where it infected both chickens and people.

This was the first time the avian influenza virus had ever been found to jump directly from birds to humans. During this outbreak, 18 people were hospitalized, and six died. Since then there have been several other outbreaks in Asia, Europe, and the Middle East.

Symptoms of avian influenza in humans have ranged from typical influenza-like symptoms, such as fever, cough, sore throat, muscle aches and eye infections, to pneumonia, acute respiratory distress, viral pneumonia, and other severe and lifethreatening complications.

Current avian influenza statistics may be obtained by visiting the Virginia Department of Health (VDH) Pandemic Influenza Activity Reports at: http://www.vdh.virginia.gov/pandemicflu/ActivityReports.asp.

Preparation in Virginia

A pandemic flu planning effort has been underway for several years in Virginia and continues. A pandemic flu response plan was first developed in 2002. Major revisions were made to the plan in early 2006 based on publication of the U.S. Department of Health and Human Services Pandemic Influenza Plan in November 2005. Virginia is working closely with national and other state partners to coordinate efforts.

VDH is leading public information efforts to raise awareness of the possibility of pandemic influenza occurring and to promote better understanding of the complex issues that will arise if pandemic flu becomes a reality. These issues include:

- Distribution of scarce medications and vaccine supplies
- Impact on daily activities:
 - 1. Closure of schools
 - 2. Cancellation of major public events
 - 3. Health care facilities use
 - 4. Community, business, and government operations

Pandemic influenza is likely to be a prolonged and widespread outbreak that could critically affect all areas of society. The ability to normally move human and material resources would be affected during a natural disaster. However, an informed and prepared public can take appropriate actions to decrease risk during a pandemic.

Potential Impact of a Pandemic Influenza Outbreak

Spread and Severity

Should a pandemic flu outbreak occur in Virginia, over several months a significant percentage of Virginia's population could become ill. Global spread could occur within three months. It is anticipated that a vaccine for the specific influenza virus would not be

available for six months after the initial outbreak. Antiviral treatment for the influenza would most likely be in short supply and may not be effective.

Projected Illness and Death

According to VDH, pandemic influenza impact estimates for Virginia include the possibility of:

- 2,700 to 6,300 deaths
- 12,000 to 28,500 hospitalizations
- 575,000 to 1.35 million outpatient visits
- 1.08 million to 2.52 million people becoming ill

School Impact and Issues

- Potential for school closings
- Large numbers of staff absent, difficulty in maintaining school operations
- Loss of services from suppliers (e.g. food services and transportation)
- Student absenteeism elevated above normal trends due to illness and family decisions

Community Considerations

- Large percentages of the population may be unable to work for days to weeks during the pandemic
- Significant numbers of people and expertise would be unavailable
- Emergency and essential services such as fire, police, and medical would be diminished
- School operations could be affected
- Methods of continued instruction must be implemented should schools close

Pandemic Influenza Periods and Associated Phases

The World Health Organization has identified three periods of a pandemic: interpandemic period, pandemic alert period and the pandemic period. Each period has corresponding phases. The phases reflect the progression of a new strain of influenza from the animal population to the human population and from localized to widespread transmission of disease.

Interpandemic Period (Phases 1 & 2)

Phase 1- No new influenza subtypes have been detected in humans

Phase 2- No new influenza subtypes have been detected in humans, however, a circulating animal influenza virus subtype poses a substantial risk of human disease

Pandemic Alert Period (Phases 3, 4 & 5)

Phase 3- Human infection(s) with a new subtype, but no human-to-human transmission Phase 4- Small clusters with limited human-to-human transmission and spread is highly localized

Phase 5- Larger clusters but human-to-human spread is still localized, suggesting that the virus is becoming increasingly better adapted to humans

Pandemic Period (Phase 6)

Phase 6- Increased and sustained transmission in the general population, recovery, and preparation for subsequent waves

Authority to Close Schools

The *Code of Virginia*, the Constitution of Virginia, and the *Virginia Administrative Code* provide the authority to close schools or institute quarantine as follows:

- The Governor of Virginia has the authority to declare a state of emergency when the safety and welfare of the people of the Commonwealth require the exercise of emergency measures due to a threatened or actual disaster (*Code of Virginia* at § 44-146.17(7)).
- The State Health Commissioner has the authority to require quarantine and/or isolation under exceptional circumstances involving any communicable disease of public health threat (*Code of Virginia* at § 32.1-43).
- The ability of local school boards and superintendents to close school is inherent in the power given to them in Article VIII, Section 7 of the Constitution of Virginia.
- The Board of Health has the authority to close schools in order to prevent a potential emergency caused by a disease dangerous to public health (*Code of Virginia* at § 32.1-42).

Social Distancing

Social distancing describes the physical distance between individuals or groups in society. Social distancing refers to focused measures to increase social distance, or activity restrictions, such as increasing distance between student desks, canceling sports activities, and closing schools. Early social distancing strategies may reduce exposure, infection and spread of influenza. School divisions should identify and implement social distancing strategies appropriate to pandemic phases. A step down approach for social distancing will be discussed in each phase of the pandemic.

School Division Preparation and Planning for an Outbreak

In planning for a pandemic, the first steps for a school division are to evaluate its current emergency management crisis plan and to ensure that a school division crisis team is in place. The *Virginia Department of Health Emergency Operations Plan*

(http://www.vdh.virginia.gov/PandemicFlu/pdf/DRAFT_Virginia_Pandemic_Influenza_Plan.pdf), the Pandemic Influenza Preparedness, Response, and Recovery Guide for Critical Infrastructure and Key Resources

(http://www.pandemicflu.gov/plan/pdf/cikrpandemicinfluenzaguide.pdf) published by the United States Department of Homeland Security and *Resource Guide for Crisis Management in Virginia Schools*

(http://www.doe.virginia.gov/VDOE/Instruction/2007crisis_guide.pdf) published by VDOE are excellent resources for schools developing a local pandemic influenza plan. A checklist from the Centers for Disease Control and Prevention (CDC) is included in **Appendix A.** The CDC School District (K-12) Pandemic Influenza Planning Checklist provides a framework to begin an internal assessment. The school division should:

- Identify members of the crisis team, including, but not limited to: community stakeholders, local government, local businesses, local emergency response agencies, public health, mental health, faith-based organizations, parents, school administration, school board members, registered school nurse, school psychologist, school counselor, teachers, students, information and communication technology, food services, transportation, and environmental/facility services.
- Appoint a pandemic influenza plan coordinator and co-coordinator.
- School divisions will maintain a crisis response team to address the emotional needs
 of students, faculty and staff in the event of a pandemic threat or actual event that
 causes serious illness or death.
- Develop a mental health response plan.
- Make the practice of reviewing and updating crisis plans a priority in each school.
- Partner closely with the local health director to establish communication procedures for surveillance of disease.
- Require school administrators to become knowledgeable of the Virginia Department of Health Pandemic Influenza Web site: http://www.vdh.virginia.gov/PandemicFlu.
- Establish a chain of command and alternates, to include: an appropriate organization chart for the school division, clearly defined responsibilities, specific flow of power, and communication networks and methods.

School divisions' human resource or personnel departments should develop a Pandemic Illness Personnel Policy to address the following issues as they pertain to a period of pandemic in the community:

- Sick leave
- Salary and benefits
- Staff absenteeism/shortages

- Payroll issues during prolonged closures
- Telecommuting
- Use of volunteers and substitutes

School divisions' instruction or curriculum departments should determine and plan ways to maintain continuity of student learning in periods of school closure or during prolonged student absences. Consider students who do not have access to the Internet or have computers. Arrangements must be made to provide appropriate interventions for children receiving Special Education Services.

Pandemic Influenza Crisis Team Responsibilities

- Develop the preparedness and pandemic response plan using the World Health Organization (WHO) phases.
- Identify school authorities responsible for activating the pandemic influenza plan.
- Review the pandemic influenza plan with the local school board.
- Consider and provide sufficient and accessible infection prevention supplies: soap, alcohol-based hand hygiene products, masks, tissues and appropriate receptacles.
- Consider provision of sufficient school operation supplies (food, cleaning supplies, paper supplies) during a pandemic when schools are open.
- Develop a process with the local public health director to report a substantial increase in absenteeism among students and faculty.
- Develop an Incident Command System within each school to manage the pandemic influenza plan, including senior administration, health services, communications, safety, engineering, and security.
- Identify methods to reduce the spread of the virus.
- Plan for the care of students who are ill and determine when ill students may return to school.
- Plan for continuity of operations and identify essential services.
- Communicate the plan to division administrative staff, school staff, parents/guardians, students, and the community.
- Provide information to families for development of individual family plans.
- Plan for the delivery of educational services in the event that a significant number of staff become ill.
- Consider the use of volunteers and/or substitutes to assist with screening students/faculty as they enter the building.
- Plan for the orderly closure of school operations, ongoing instruction, and eventual school reopening.
- Coordinate school closure with surrounding school divisions.
- Plan for the care of international students in Virginia's schools.
- Plan for the use of school facilities by community partners during the pandemic if the schools are closed.
- Plan the communication process for sharing information strategies, and decisions with local agencies and local government.

• Test the plan.

School Building Administration Responsibilities

When the division pandemic influenza/crisis plan has been updated or developed, it must be communicated to:

- School administration and staff
- Local school board members
- Parents
- Students
- Local agencies
- School community
- Local government
- Local business community

Communication to Employees

- Review the school crisis plan, including the pandemic influenza plan, with all building employees.
- In advance, provide up-to-date and reliable pandemic influenza information (**Appendix B**).
- Communicate and educate faculty/staff on the basic ways to stay healthy and reduce chances of contracting influenza.
- Share communication methods and processes.
- Establish building level procedures for providing information to the public and news media.
- Test the communication plan.

Communication to Students/Parents/Guardians

- Provide information about the division/school's pandemic preparedness and response plan to include person/family responsibilities.
- Provide accurate information rapidly.
- Disseminate information to parents about the potential impact of a pandemic on school functioning, such as arranging for childcare and continuity of instruction should schools be closed.
- Provide parents tips for planning for a pandemic. See www.ready.gov .
- Provide a checklist as appropriate. See www.pandemicflu.gov.
- Provide culturally and linguistically appropriate communications, taking care to meet the needs of all students/families with special needs.

PANDEMIC INFLUENZA OUTBREAK RESPONSE

Information regarding the occurrence of a pandemic in a community will be provided by the state and local health departments and others designated by the Commonwealth of Virginia. Virginia's response to a pandemic will be guided by the World Health Organization (WHO) phase declaration. This response will include specific considerations during each phase of the pandemic regarding surveillance, vaccine delivery, administration of antiviral medication, and communications. School divisions must take action at each phase, particularly with respect to school-based containment measures. The following provides recommendations for activities in response to WHO phases.

Interpandemic Period

Phase 1- No new influenza subtypes have been detected in humans

Phase 2- No new influenza subtypes have been detected in humans, however, a circulating animal influenza virus subtype poses a substantial risk of human disease

The CDC reports the distinction between **phases 1** and **2** is based on the risk of human infection or disease resulting from circulating strains in animals.

Expected School Division Actions

- Prepare, review, or revise the school division pandemic influenza plan.
- Establish baseline absentee rate.
- Identify prevention mechanisms.

Virginia Department of Education Actions

- Provide guidance, information, and technical assistance to local school divisions in the development of division plans.
- Establish communication networks and partnerships with key stakeholders, such as the Virginia Department of Health and the Virginia Department of Emergency Management.
- Design and maintain a Web site for pandemic influenza information.

Access Control

- Develop a policy that enables school administrators to control access to the buildings.
- Each school should have a plan to lock down certain entrances and exits and to monitor others, if necessary.
- Identify a main entrance and an indoor screening area where students and staff will be screened prior to moving to classrooms or other areas of the building for each school.
- Develop a plan to close down or curtail bus transportation when necessary.

• Develop social distancing strategies.

Surveillance, Screening and Triage

During all stages of a pandemic flu outbreak, it will be essential to monitor and document the number of students and faculty who are absent and meet the definition of influenza-like illness. Keeping track of these numbers will help school and health officials determine when and whether to close schools, whether the epidemic is increasing in scope and whether to declare an epidemic, making schools eligible to apply for reimbursement of average daily attendance funds during increased absenteeism.

- Establish baseline absentee rate, by school, if this has not already been done.
- Building-level school health services personnel (registered nurses, licensed practical nurses, nursing assistants, or principal's designee) will develop a plan to screen all students and staff. Younger children may be observed by health services personnel for cough. Older children may be asked the following question: "Do you have a new cough that has developed over the last 10 days?"
- School health services personnel will provide staff and students who have a new cough with tissues. Surgical masks are not appropriate for all situations, but for specific health care settings (school health office).
- School health services personnel will document screening data and review each week for analysis of trends.
- The school nurse will evaluate individuals who have a new cough or fever (temperature ≥ 100.4) and place all individuals who have fever and a new cough on droplet precautions, pending further evaluation.
- Students who have been identified as ill will be placed in an identified isolation room for sick children until picked up by parents.
- Local school division health services staff have the authority to restrict individuals (staff and students) who have fever and a new cough from work, class, or any other group gathering. They also have the authority to send any student or staff home that they suspect may have a communicable disease that puts others in the school at risk. The legal authority is found in the *Code of Virginia* §22.1-272, Contagious and infectious diseases, and is accessible on-line at: http://leg1.state.va.us/cgi-bin/legp504.exe?000+cod+22.1-272
- Absenteeism will be monitored for any trends. School health staff will work with school administrators, social workers and attendance clerks to monitor absentee trends. Significant trends will be reported to the School Nurse Coordinator or School Health Contact Person, who will inform the Superintendent and the local health department.
- Infection control posters will be placed at all school entrances and common areas to encourage all persons entering the school buildings to self-screen. Posters are available for downloading on the VDH Web site:

 http://www.vdh.virginia.gov/PandemicFlu/Schools.asp
- Poster information will include health tips for protection against the spread of the flu and other germs and viruses.

• The School Health Services Nurse Coordinator will monitor national, regional, and local data related to epidemic respiratory infections. Information will be posted on the VDH Pandemic Flu Web site at http://www.vdh.virginia.gov/PandemicFlu.

Infection control/Precautions

- Staff, students, and visitors will use droplet precautions (private room and surgical mask within three feet of ill person) for all contact with any individual who has a new cough and fever, until a diagnosis of a non-contagious respiratory illness, or an infection requiring a higher level of precautions is made.
- If students, staff or visitors present with symptoms while at school, they should be provided a surgical mask while awaiting transportation away from the facility.
- School staff will ask persons who have a new cough to wear a surgical mask or use tissues to cover their mouth and nose when coughing, and to use proper hand hygiene during the time they need to be in the school building (Note: wearing a surgical mask is not a guarantee of protection in a general setting).
- Wash hands thoroughly and often: use soap and water and wash for at least 20 seconds. Use alcohol-based hand sanitizers when hand washing is not possible. It is advised that all classrooms have alcohol-based hand sanitizers available for use by students and staff.
- Schools will advise all persons, including staff, students, and visitors, who have fever and cough to defer attending or visiting the school until their illness has resolved.
- If an isolation room is in use, a precaution sign will be placed on the door.
- Schools will maintain adequate supplies of surgical masks, waterless hand rub, surface cleaners and disinfectants, and tissues throughout public areas, classrooms, and meeting rooms and in the school health offices. All surfaces will be cleaned and disinfected with an Environmental Protection Agency (EPA)-registered household disinfectant labeled for activity against bacteria and viruses, an EPA-registered hospital disinfectant, or EPA-registered chlorine bleach/hypochlorite solution. Labeled instructions should always be followed when using any of these disinfectants. The Maintenance Facilities Department of each school division will provide this disinfectant to the schools in an appropriately labeled container.
- Maintain appropriate inventories of supplies.
- Protocols for waste disposal must be developed.
- Schools will display hand-washing posters and cover your cough posters in high-traffic areas and classrooms. Posters available at: http://www.vdh.virginia.gov/PandemicFlu/Schools.asp.
- Provide frequent training for school staff in procedures and protocols.

Communication/Education

School divisions will develop an effective and sustainable plan for communication and promotion of messages relating to epidemic respiratory infections to internal and external audiences.

- Infection control measures will be reviewed with staff, annually, as well as strategies for communicating information to health services providers in the event of an epidemic respiratory infection.
- Translation services for languages in the represented student population will be provided.
- Briefings for the local news media should be considered for the dissemination of accurate and timely information.
- Establish partnerships for dissemination of accurate and timely information.
- A variety of media may be used to communicate with the community including: newsletters, take-home flyers, messages on school menus, Web sites, school TV channels, county TV channels, and phone hotlines. (See samples in Appendix A).
- Encourage individual and family preparation. The CDC *Pandemic Flu Planning:* Checklist for Individuals and Families and VDOE Tips for Parents are included in **Appendix A**.

Social Distancing

- Confirm that the pandemic plan is complete and has been recently reviewed by the crisis team.
- Provide community education regarding pandemic influenza and the school's pandemic flu response plan.
- Promote prevention strategies such as hand washing and coughing/sneezing into the sleeve or tissue
- Identify social distancing strategies to put in place for your school division should you have to use them.

Additional Preparedness Activities

The following recommendations are for **regular** influenza season. Routine vaccination against seasonal influenza establishes good health practices and may boost the immune system during a pandemic flu outbreak. There will be a separate vaccination campaign that may take place during a pandemic.

- School divisions will encourage influenza vaccination during the influenza season to reduce morbidity from seasonal influenza transmission in school staff.
- All eligible staff will be offered the opportunity to receive influenza vaccine. School divisions can collaboration with local health departments for this service. School nurses in collaboration with local health departments can hold vaccination clinics on designated days.
- School divisions can provide staff with information for local clinics providing the influenza vaccine.
- Educational and promotional materials can be provided to school staff to promote availability and desirability of influenza vaccine for all ages.
- The school division Emergency Planning Team and School Nurse Coordinator will monitor communications from public health officials to review changes in

recommendations about screening criteria and will communicate changes to school nurses and administrators by email or telephone.

Pandemic Alert Period

Phase 3- Human infection(s) with a new subtype, but no human-to-human transmission Phase 4- Small clusters with limited human-to-human transmission, and spread is highly localized

Phase 5- Larger clusters but human-to-human spread is still localized, suggesting that the virus is becoming increasingly better adapted to humans

The CDC reports the distinction among phases 3, 4, and 5 is based on an assessment of the risk of a pandemic. Various factors and their relative importance according to current scientific knowledge may be considered. Factors may include rate of transmission, geographical location and spread, severity of illness, and other scientific parameters.

Activities are cumulative through the phases, and therefore, those activities from the Interpandemic Period should be carried over to this phase and supplement the recommendations below.

Expected School Division Actions

- Provide name and contact information for school division point of contact to VDOE.
- Outline and test channels of communication.
- Test plans for continuing delivery of instruction in the event schools are closed.
- Meet with the emergency response team and review the community containment plans.
- Review data on absenteeism and illness.

Virginia Department of Education Actions

- VDOE Web site will be a point of information for local school divisions.
- Outline communication channels and methods and types of information that will be required from local school divisions during the pandemic period.
- Test communication channels.
- Coordinate across state agencies and with the Emergency Operations Center (EOC) and the Virginia Department of Emergency Management (VDEM).
- Implement the State Continuity of Operations Plan (COOP).
- Provide technical assistance for situational assessment and planning.

Access Control

- Review the need to restrict the use of school facilities and group activities within school buildings. This decision will be made by the School Division Superintendent in consultation with the local Health Department Director.
- Implement applicable portions of the access control plan created in the Interpandemic Period.

Surveillance, Screening and Triage

- Infection control signs will be posted at all entrances, and in all common areas (in dormitories, libraries, gymnasiums, auditoriums, cafeterias, classrooms, restrooms).
- Persons who self-identify with cough, fever or flu symptoms will be instructed to don surgical masks and should go to the school health office for clinical evaluation.
- Health services personnel who suspect, after initial clinical evaluation, that a person may have an epidemic respiratory infection, will immediately contact the School Nurse Coordinator or Health Services Contact Person and the local health department.
- Staff and students who have had contact with suspected patients must register with health services and be screened daily for fever or respiratory symptoms.
- Surveillance will increase for individuals and groups as indicated by the Centers for Disease Control and Prevention and the local health department. Staff and students will be screened by use of questionnaires and physical assessment.

Infection Control/Precautions

- Airborne, droplet, and contact precautions are required for all contact with any person who has screened as a possible influenza case, until an alternate diagnosis is made.
- Droplet precautions will be required for any person who has a new cough and fever (100.4 or higher), but no risk factors for pandemic influenza, until a diagnosis of a non-contagious respiratory illness, or an infection requiring a higher level of precautions, is made. School Health Services personnel have the authority to exclude any individual with a new cough and fever until a diagnosis of non-contagious respiratory illness is made.

Communication/Education

- Communicate, to parents and the community, the criteria for school closure or curtailed operations.
- Provide timely and accurate information to parents.
- Post designated staff members at high-traffic areas, on site, to answer questions and direct persons to the school health office for evaluation, as needed.

- Local school divisions, in collaboration with the local health department, will keep the community informed and provide education about disease prevention and symptom surveillance through activities outlined in the interpandemic period.
- Work with local government, media, VDH, and community partners to convey consistent information.

Social Distancing and School Closure

- Review staffing plan and activate utilization of substitutes and volunteer staff as appropriate.
- Increase disinfection of the building.
- Place hand sanitizer outside each classroom.
- Increase social distancing strategies: move desks further apart, maintain space between people when walking in the hallways, and other strategies to decrease large numbers of students intermingling such as suspending programs held in the school auditorium, canceling sporting events, and eating lunch in the cafeteria.
- Prepare the community for altered school schedules or school closure.
- Prepare taped lessons and/or finalize methods for continuing instruction in case of school closure (i.e., public television, internet).
- Finalize procedures for implementing social distancing strategies such as, rotating teachers instead of students, modifying school hours/days of operation, or complete school closure.
- Provide frequent training for school staff in procedures and protocols.
- Implement infection control measures such as isolation of students with a new cough and fever.
- Increase communication with parents and the community.

Additional Preparedness Activities

• The local school division emergency pandemic team will meet daily to review the situation and school system strategies. They will evaluate the effectiveness of implemented activities and make recommendations for change, as indicated.

Pandemic Period

Phase 6- Increased and sustained transmission in the general population, recovery, and preparation for subsequent waves

When there is evidence of institutional transmission of pandemic influenza or if there is widespread human-to-human transmission in the local community, the school division will enter the highest level of alert, with restrictions on access to the facilities and buildings.

At this level the school divisions will consider implementing the following actions:

Expected School Division Actions

- Participate in daily reporting activities, conference calls, Web EOC, e-mail.
- Hold regular meetings of local emergency response teams.
- Implement social distancing strategies.
- Report plans for continuing the delivery of instruction.
- Plan for make-up time in the event that schools are closed.
- Activate the mental health response plan.

Virginia Department of Education Activities

- Facilitate statewide reporting activities.
- Explore and communicate potential policy changes regarding Standards of Learning and No Child Left Behind.
- Explore and communicate potential policy changes regarding make-up time in the event that schools are closed.
- Provide guidance, technical assistance, and current information to local school divisions

Access Control

- All entrances to the schools will be locked except for the main entrance.
- Entry into schools will be restricted to the following people:
 - 1 Staff and students
 - 2. Authorized volunteers
 - 3. Parents/guardians of students
 - 4. Authorized emergency response personnel
- Cafeteria activities may be suspended or modified.
 - 1. A plan should be developed for delivering meals to students if the cafeteria or group-style dining is closed.
 - 2. Delivery of box or bag meals to the classrooms with the assistance of school staff may be necessary.
- There may be some degree of suspension of activities, including sporting events, arts performances, and classes as determined by the school division superintendent in consultation with the local health department director and community emergency response team.
- Gatherings of groups larger than normal class size may be limited during the school day (e.g. assemblies, recess).
- Student spacing may be necessary. This refers to placing distance between individuals to reduce the spread of the virus between people. Education regarding student spacing should be provided to all staff, students and parents.

- An appropriate room for isolation should have been designated and will be utilized at this time. Access to this room should be strictly limited and monitored.
- Bus transportation for students, on and off campus, may be consolidated or suspended. In some instances, staggered bus routes should be considered to decrease the number of students on each bus.
- Bus drivers should be trained and authorized to use a screening process and infection control procedures. They should have the authority to deny boarding of sick students or to have students sit in a designated area on the bus and wear a mask.
- A bus may be designated to transport sick students home.
- Parents should be made aware of the policies for transporting students.
- The decision to close a school division may be made as a means to prevent further spread of an epidemic, or in response to high student and/or staff absenteeism by the superintendent in consultation with the local emergency pandemic team and/or the local health department director.
- The decision to close a school must always be communicated to the parents and community in a timely manner.

Surveillance, Screening and Triage

- Students and staff who have a fever and cough will be asked to stay home. Absences should be reported to the school attendance office.
- Those allowed into the school building will be screened for fever or cough and have their temperatures taken. Each person cleared to enter the building will be given something to indicate that they are free to enter the building (e.g. a sticker, a card, a stamp on their hand).
- Students who are identified as having fever or cough may be instructed to don a surgical mask, wash hands, and go to a designated isolation area to be picked up by a parent/guardian.
- Adults and students accompanied by an adult may be excluded from entry into the school and instructed to call their health care providers for advice and evaluation.
- In a state-operated residential school, after clinical evaluation, a student who has fever or cough may be allowed to remain at the school with precautions unless the student requires further medical evaluation. The superintendent, in consultation with the local health director, will develop the policy.
- The name and phone number/address of all persons seen with fever and new cough will be recorded and reported daily to the local school division school nurse coordinator or school nurse supervisor. This information will be shared with the local health department.
- If a person warrants medical evaluation, health services staff should alert the appropriate medical resource that a suspect case needs evaluation so that the referral center can make arrangements for infection control precautions.

Infection Control/Precautions

- Adequate supplies of personal protective equipment, hand sanitizer and tissues will be maintained throughout each school in the division. The local school purchasing department will ensure the maintenance of stock.
- Students and staff who have had contact with suspected patients should be screened daily for fever or respiratory symptoms by school health staff.
- Students and staff will be asked to wash hands often as hand washing is the best protection against infection.
- Students and staff will be asked to use the "elbow salute" for coughs and sneezes.
- Staff will be encouraged to get a seasonal influenza shot. This is not protection from avian influenza but keeps individuals and the population in optimum health and therefore better able to resist an infection like avian flu.
- Employees and students who have flu or flu-like symptoms should not come to school.
- In a school residential setting, students with fever and cough should be isolated from other students including exclusion from all events (sports, classes, group meals) until a diagnosis is confirmed. If the student shares a room with other students, arrangements should be made for the student to be given a private room (for example, to remain in health services in a private patient room or in an empty dorm room). Arrangements should be made to provide the students with necessary items, including meals, water, and items for hygiene.
- Student spacing strategies may be employed to decrease contact with students who may be infected but not exhibiting symptoms.
 - 1. It is recommended that students' desks be spaced three (3) feet apart.
 - 2. Discourage prolonged congregation in hall ways and lunch rooms.
 - 3. Stagger school schedules.
 - 4. Stagger bus routes, so there are fewer people on each bus.
 - 5. Limit group activities and interaction between classes.
 - 6. Cancel gym class, choir or other school activities that place individuals in close proximity.
- Alter school cleaning routines by maintenance staff.
 - 1. Disinfect shared work areas, counters, restrooms, door knobs and stair railings more frequently during the influenza pandemic.
 - 2. The school health office and holding areas for ill children should be cleaned at least twice each day.
 - 3. Air conditioning system filters should be cleaned and changed frequently.
 - 4. Telephones should not be shared.
 - 5. Specialized cleaning solutions are not essential. Standard cleaning products are adequate (including soap and water) and can disinfect surfaces. The frequency of cleaning is most important.
 - 6. During the day, where operationally possible, increase ventilation to the facility to decrease spread of disease. Following each school day, the school

should be thoroughly ventilated and cleaned: opening all doors and windows or turning the air conditioning/heating systems up.

Communication/Education

- News briefings shall be held with local media, as needed, to provide consistent, accurate, and timely information to the community.
- Updates will be provided by the school division emergency pandemic team to the community, parents, students, staff, and media on a daily basis or more often, as needed, on the progress of the pandemic and its effects.
- If schools are closed, parents and students will be advised as to how classroom assignments are to be continued, completed and submitted for grading.
- If schools are closed, parents and students will be notified about reopening procedures.
- In the event of prolonged school closure or repeated school closures, parents and students will be notified about any changes that will occur in grading policies, testing and graduation requirements, in a timely manner.
- Upon reopening, the emergency pandemic team will ensure debriefing of administration, staff, parents and students. Every effort should be made to have additional mental health resources available for the successful transition of students and staff back into the school setting and a normal routine.
- Upon reopening, the school division should remain on heightened alert, replenish an adequate supply of all needed materials and be prepared for additional waves of disease.

School Closure Strategies

- Offer a range of options for schools to meet the needs of individual school divisions and communities as dictated by the severity of the pandemic in the locality:
 - o Suspend large gatherings
 - o Rotate teachers to classrooms instead of students mixing (especially at the secondary level)
 - Modify school hours/days of operation (i.e., students with last names A-J come to school Monday and Wednesday, students with last names K-Z come to school on Tuesday and Thursday)
 - Stagger school hours (split days or weeks)
 - o Complete school closure
 - o Implement alternate methods of instruction
- Implement procedures to identify and report suspected and confirmed cases of pandemic influenza.
- School divisions must plan for the reopening and continued operation of schools. Plans must be communicated with parents and the community.
- Evaluate the effectiveness of alternate instructional methods and modify for subsequent waves of disruption.

School Closure

The decision to close schools is complex. Therefore, it is not feasible to give a one-size-fits-all answer to the question, "When should schools close?" Division superintendents and school boards, in consultation with local health directors, are in the best position to assess the needs of the community when determining when schools should close. Communication and coordination with local businesses is suggested to ensure an adequate workforce and appropriate parental supervision of children. Prolonged disruption of the education system could severely impact other key social structures (i.e., conflicts for working parents, high absenteeism in the workplace, structures critical to the pandemic response).

Community actions may significantly reduce illness and death. Triggers for closing school may include increased absenteeism, decreased instructional and support workforce, students kept at home out of fear, the number and severity of cases of influenza in the community and surrounding area, inability to get needed supplies (i.e., food, heating oil, no public transportation), and the need to use the facility for other purposes.

The CDC has prepared *Interim Pre-pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States- Early, Targeted, Layered Use of Nonpharmaceutical Interventions.* This document outlines school closure depending upon the Pandemic Severity Index. The Pandemic Severity Index is based upon the case fatality ratio (the proportion of deaths among clinically ill persons). This document provides valuable guidance. However, waiting for the case fatality ratio will severely diminish the advantages of early social distancing efforts to contain and control the spread of disease. Death rate data would be available too late to impact school closure decisions. Therefore, the VDOE recommends a tiered approach to social distancing strategies. Closing schools is a form of social distancing and should be considered during the Pandemic Period but is not the only strategy available to school divisions. Closing schools will only be an effective social distancing strategy if coordinated with local businesses and community operations so that students stay at home.

Conclusion

Pandemic influenza could have a devastating effect on the citizens of the Commonwealth. If a pandemic were to occur, we should expect tremendous disruption to our daily activities, the procurement of supplies, and to business and government operations. The work force could be greatly reduced.

Planning for a pandemic, in advance of the actual event, will assist in fostering heightened awareness, personal preparation, and the ability to maintain as near-normal functioning as possible. This guide has been designed to assist schools in identifying the issues that need to be addressed in order to continue the instruction of students and support families and employees under very stressful conditions.

Each school division should develop their own respective plan, based upon local school policy. The emergency pandemic team should be composed of members that represent all aspects of the local community. The plan should be communicated to all stakeholders and practiced in order to identify areas of weakness needing further study and improvement.

References

California Contra Costa Health Services, Sample Parent Letters, Available [Online] http://cchealth.org.

Centers for Disease Control and Prevention, *Interim Pre-Pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States-Early, Targeted, Layered Use of Nonpharmaceutical Interventions*, February 2006. Available [Online] http://www.pandemicflu.gov/plan/community/mitigation.html.

Iowa Department of Public Health, *Pandemic Influenza Planning guide for Iowa Schools*, January 2006. Available [Online] http://www.idph.state.ia.us.

California Contra Costa Health Services, http://cchealth.org.

State of New Hampshire, *Influenza Pandemic Public Health Preparedness & Response Plan*, 2 March 2006. Available [Online] http://www.dhhs.nh.gov.

APPENDIX A

Sample Forms for Communication to Parents and Staff

Pandemic Influenza: Health Tipsp.24
Sample Letter: Prevention and Informationp.25
Sample Letter: First Bird Case
Sample Letter: Initial Pandemic Flu Outbreakp.27
Sample Letter: Expanded Outbreak
Sample Letter: School Closure
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VDOE Tips for Parentsp.33
CDC Pandemic Flu Planning: Checklist for Individuals and Familiesp.35
CDC Child Care and Preschool Pandemic Information Planning Checklistp.37
CDC School District (K-12) Pandemic Influenza Planning Checklistp.42

APPENDIX B

Resources for Current and Accurate Information

http://www.pandemicflu.gov

http://www.vdh.virginia.gov/PandemicFlu

http://www.cdc.gov

http://www.niaid.nih.gov/factsheets/flu.htm

http://www.who.int/csr/disease/avian_influenza/en/index.html

Virginia Department of Education:

Tia.campbell@doe.virginia.gov

Cynthia.cave@doe.virginia.gov

Pandemic Influenza: Health Tips http://www.cdc.gov/germstopper/

Information for parents and school staff:

Protect yourself against the spread of the flu and other germs and viruses:

- The main way illnesses like the flu and the common cold spread is by tiny droplets sprayed into the air when someone coughs or sneezes. Cover your nose and mouth with a tissue or your upper sleeve when coughing or sneezing. Throw away used tissues immediately.
- Wash hands thoroughly and often. That means using soap and warm water and washing for 20 seconds. Use alcohol-based hand sanitizers when hand washing is not possible.
- Avoid touching your eyes, nose or mouth. Germs are often spread when you touch something contaminated with germs. Germs can live for two hours or more on surfaces like doorknobs, desks or chairs.
- Avoid close contact with those who are sick.
- Visit http://www.cdc.gov/germstopper/ for more information.

If you do come down with a cold or the flu, take these steps to get well:

- Wash your hands often.
- Stay home and keep your distance from others to protect them from getting sick, too.
- Get plenty of rest.
- Drink lots of fluids like water, tea, broth or juice.
- Take acetaminophen or ibuprofen as needed for pain or fever.
- Use a vaporizer or saline drops to relieve congestion.

SAMPLE PARENT LETTER: Prevention and Information

Use this letter to help <u>prepare</u> parents for pandemic flu <u>before</u> there are human or bird flu cases in the U.S.

Dear Parents,

This letter will help your family prepare for a flu pandemic that could make many people sick.

It is important to know that at this time, there is no pandemic flu of any kind in the United States. There is also no bird/avian flu in the United States at this time.

Public health officials are worried the avian/bird flu virus may change so that it can infect people and spread easily from person-to-person. This would cause a worldwide flu outbreak, called a pandemic.

Public health officials want people to protect themselves against pandemic flu.

Here are some ways to protect your family:

- Keep children who are sick at home. Don't send them to school.
- Teach your children to wash hands a lot with soap and water for 20 seconds. Be sure to set a good example by doing this yourself.
- Teach your children to cover coughs and sneezes with tissues or by coughing into the inside of the elbow. Be sure to set a good example by doing this yourself.
- Teach your children to stay at least three feet away from people who are sick.
- People who are sick should stay home from work or school and avoid other people until they are better.

Enclosed with this letter is a checklist to help families get ready for a pandemic flu outbreak. This information can also help your family get ready for any kind of emergency.

If you have questions, please contact your school nurse or healthcare provider. You can call the school hotline (INSERT NUMBER)

The federal government website with information on planning for individuals and families: http://www.pandemicflu.gov

American Red Cross http://www.redcross.org

http://www.redcross.org

SAMPLE LETTER: First Bird Case

Use this letter to help prepare parents for pandemic flu after the first bird case is found in the United States. Even though the confirmation of a bird infected with avian/bird flu in the United States does not signal a pandemic, there will be confusion and concern when this happens.

Dear Parents,

As expected, birds sick with avian/bird flu viruses are now in the United States. It is important to know that, at this time, there are no known human cases of avian/bird flu in the United States.

Health officials are worried that the avian/bird flu virus may change so that people can get sick from it. If that happened it could spread from person-to-person. This would cause a worldwide flu outbreak, called a pandemic.

So even though there is no flu pandemic now, we want to remind you about some ways to protect your family from getting sick:

- Keep children who are sick at home. Don't send them to school.
- Teach your children to wash hands a lot with soap and water for 20 seconds. Be sure to set a good example by doing this yourself.
- Teach your children to cover coughs and sneezes with tissues or by coughing into the inside of the elbow. Be sure to set a good example by doing this yourself.
- Teach your children to stay at least three feet away from people who are sick.
- People who are sick should stay home from work or school and avoid other people until they are better.
- Do not touch sick or dead birds

Enclosed with this letter is a checklist to help families get ready for a pandemic flu outbreak. This information can also help your family get ready for any kind of emergency.

If you have questions, please contact your school nurse or healthcare provider. You can call the school hotline (INSERT NUMBER)

You can get more information from Contra Costa Health Services:

Visit online at http://cchealth.org

The federal government website with information on planning for individuals and families: http://www.pandemicflu.gov

The American Red Cross: http://www.redcross.org

SAMPLE LETTER TO PARENTS: Initial Pandemic Flu Outbreak

Use this letter to give parents basic information about a pandemic flu outbreak.

Dear Parents,

This letter will give you information about a flu outbreak in [Insert your county/city here]. Every year, some people get sick with the flu during the fall and winter months. This year, there is a new flu virus that is making many people in [Insert you county/city here] sick. So many people are sick in [Insert you county/city here] and the United States that health officials call it a "pandemic flu."

A lot of students and teachers in our school are sick with the flu. We hope they will all get better quickly.

At this time, the county health department tells us that students who are not ill can safely come to school. The schools will remain open. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to keep sick children home. Any children who are sick in school will be sent home.

Public health officials want you to protect yourself and your family against pandemic flu. Here are some ways to stop the spread of germs and sickness:

- Keep children who are sick at home. Don't send them to school.
- Teach your children to wash hands a lot with soap and water for 20 seconds. Be sure to set a good example by doing this yourself.
- Teach your children to cover coughs and sneezes with tissues or by coughing into the inside of the elbow. Be sure to set a good example by doing this yourself.
- Teach your children to stay away at least three feet away from people who are sick.
- People who are sick should stay home from work or school and stay away from other people until they are better.
- Stay away from shopping malls, movie theaters or other places where there are large groups of people.

We are also giving you some tips about how to care for your family if they are ill.

If you have questions, please contact your school nurse or healthcare provider. You can call the school hotline (INSERT NUMBER).

You can get more information from Contra Costa Health Services:

Visit online at http://cchealth.org

The federal government website with information on planning for individuals and

families: http://www.pandemicflu.gov

The American Red Cross: http://www.redcross.org

If the pandemic flu continues to spread and more students become ill, schools may close for days or weeks. The purpose of closing schools will be to keep children from getting sick. If schools are closed, children should stay at home. Begin planning now for childcare in your home.

Recommendations may change during the course of a pandemic flu outbreak.

SAMPLE LETTER TO PARENTS: Expanded Outbreak

Use this letter to let parents know schools are open and urge ill children to stay home.

Dear Parents,

We wrote to you recently to tell you about a pandemic flu outbreak in our community. Here is some new information.

There are now even more students in our school who are ill with this flu virus. The county health department tells us that students who are not ill may continue to attend school. Schools remain open at this time. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to keep sick children home. Any children who are sick in school will be sent home.

Public health officials want you to protect yourself and your family against pandemic flu. Here are some ways to stop the spread of germs and sickness and take care of your family

- Keep children who are sick at home. Don't send them to school.
- If some of the people in your home are sick with the flu, keep them away from the people who are not sick.
- If some of the people in your home are sick with the flu and you cannot see a health provider, some things you can do to help them are:
 - o Have them drink a lot of liquid (juice, water)
 - o Keep the ill person as comfortable as possible. Rest is important.
 - O For fever, sore throat and muscle aches, in adults, use ibuprofen (Motrin) or acetaminophen (Tylenol). <u>Do not use aspirin with children</u> or teenagers; it can cause Reye's syndrome, a life-threatening illness.
 - o Keep tissues and a trash bag within reach of the sick person.
 - o Be sure everyone in your home washes their hands frequently.
 - Contact a healthcare provider for further advice. If the ill person is having difficulty breathing or is getting worse, contact the healthcare provider right away.

If you have questions, please contact your school nurse or healthcare provider. You can call the school hotline (INSERT NUMBER).

If the pandemic flu continues to spread and more students become ill, schools may close for days or weeks. The purpose of closing schools will be to keep children from getting sick. If schools are closed, children should stay at home. Begin planning now for childcare in your home.

You can get more information from Contra Costa Health Services: Visit online at http://cchealth.org

The federal government website with information on planning for individuals and

families: http://www.pandemicflu.gov

The American Red Cross: http://www.redcross.org

SAMPLE LETER TO PARENTS: School closure

Use this letter to inform parents of school closing.

Dear Parents	,			
The	health officials have ordered all schools into close. This order is because of the pandemic flu situation in All schools are immediately closed until further notice and children			
should stay h	y .			
Schools may spread of the	be closed for days or even weeks to reduce contact among children and stop the flu.			
	at many students and their families are very sick. We know this is a hard time for ity and our hearts go out to those who are ill.			
to gather. D groups as mu	It is easily spread from person-to-person, it is not safe for large groups of people uring this time, both children and adults should stay away from other people and ach as possible. They should not gather in other locations such as shopping malls, its or community centers.			
	t it may be hard to get a doctor's appointment, go to a clinic or even be seen in a gency room. Here are some tips for helping those who are sick with the flu:			
0	Have them drink a lot of liquid (juice, water)			
0	Keep the sick person as comfortable as possible. Rest is important.			
O	For fever, sore throat and muscle aches, use ibuprofen (Motrin) or acetaminophen (Tylenol). <u>Do not use aspirin with children</u> or teenagers; it can cause Reye's syndrome, a life- threatening illness.			
0	Keep tissues and a trash bag within reach of the sick person.			
0	Be sure everyone in your home washes their hands frequently.			
0	Keep the people who are sick with the flu away from the people who are not			

For more information, call your healthcare provider We will contact you as soon as we have information about when school will reopen.

sick.

SAMPLE LETER TO PARENTS: School Re-Opens

Use this letter to inform parents schools are re-opened.

Dear Parents,	
The control. Our school will oper may safely return to class.	health officials have declared the pandemic flu is under again on At this time, students
And health officials say that more people could become si	ng, there are still some people who are sick from the flu virus andemic flu outbreaks sometimes happen in waves. This means it soon again. If more people get sick, schools may need to close you any important information.
Because the flu can still be sp home. Don't send them to se	ead from person-to-person, please keep children who are sick at nool.
We are looking forward to se	ing your children again.

Tips for Parents



Plan for an extended stay at home during a flu pandemic.

- Ask your employer about how business will continue during a pandemic.
- Ask your employer if you can work from home during a flu pandemic.
- Plan for a possible reduction or loss of income, if you are unable to work or your place of employment is closed.
- Check with your employer or union about leave policies.
- Plan home learning activities and exercises. Have materials, such as books, on hand.
- Plan recreational activities that your children can do at home.

Items to have on hand for an extended stay at home:

Examples: N	lon-perishable food	s Health	and emergency supplies
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Ready to eat canned meats,
fruits, vegetables, soups
Protein or fruit bars
Dry cereal or granola
Peanut butter and jelly
Dried fruit, nuts, trail mix

Prescribed medical supplies such as
glucose and blood pressure monitoring
Soap and water or alcohol based hand wash
Medicines for fever, such as acetaminophen
(Tylenol) or ibuprofen (Motrin)
Thermometer

Crackers Vitamins
Canned juices Fluids with

Canned juices Fluids with electrolytes, such as Pedialyte® Bottled water Flashlight with extra batteries

Canned or jarred baby food Portable radio with extra batteries

Baby formula Manual can opener
Pet food Garbage bags

Tissues, toilet paper, disposable diapers

If someone in your home develops flu symptoms (fever, cough, muscle aches):

- ✓ Encourage plenty of fluids to drink.
- ✓ Keep the ill person as comfortable as possible. Rest is important.
- ✓ For adults with fever, sore throat and muscle aches, use ibuprofen (Motrin) or acetaminophen (aspirin).
- ✓ <u>Do not use aspirin in children</u> or teenagers; it can cause Reye's syndrome, a life-threatening illness.
- ✓ Sponging with tepid (wrist-temperature) water lowers fever only during the period of sponging. <u>Do not sponge with alcohol.</u>
- ✓ Keep tissues and a trash bag for their disposal within reach of the patient.
- ✓ All members of the household should wash their hands frequently.
- ✓ Keep other family members and visitors away from the person who is ill.

✓ Contact a healthcare provider for further advice. If the ill person is having difficulty breathing or is getting worse, contact the healthcare provider right away.

For more information, call your healthcare provider or visit Virginia Department of Health Web site: www.vdh.virginia.gov/Pandemicflu or Federal Government's pandemic flu Web site: http://www.pandemicflu.gov

Pandemic Flu Planning Checklist for Individuals and Families

You can prepare for an influenza pandemic now. You should know both the magnitude of what

can happen during a pandemic outbreak and what actions you can take to help lessen the impact

of an influenza pandemic on you and your family. This checklist will help you gather the

information and resources you may need in case of a flu pandemic.

1. To plan for a pandemic:
☐ Store a supply of water and food. During a pandemic, if you cannot get to a store, or
if stores
are out of supplies, it will be important for you to have extra supplies on hand. This can be
useful in other types of emergencies, such as power outages and disasters.
☐ Ask your doctor and insurance company if you can get an extra supply of your
regular prescription drugs.
☐ Have any nonprescription drugs and other health supplies on hand, including pain relievers,
stomach remedies, cough and cold medicines, fluids with electrolytes, and vitamins.
☐ Talk with family members and loved ones about how they would be cared for if they
got sick, or what will be needed to care for them in your home.
☐ Volunteer with local groups to prepare and assist with emergency response.
☐ Get involved in your community as it works to prepare for an influenza pandemic.
2. To limit the spread of germs and prevent infection:
☐ Teach your children to wash hands frequently with soap and water, and model the
correct behavior.
☐ Teach your children to cover coughs and sneezes with tissues, and be sure to
model that behavior.
☐ Teach your children to stay away from others as much as possible if they are sick.
Stay home from work and school if sick.

3. Items to have on hand for an extended stay at home: **Examples of food and non-perishables** ☐ Ready-to-eat canned meats, fruits, vegetables, and soups ☐ Protein or fruit bars ☐ Dry cereal or granola ☐ Peanut butter or nuts ☐ Dried fruit □ Crackers Canned juices ■ Bottled water ☐ Canned or jarred baby food and formula ☐ Pet food Examples of medical, health, and emergency supplies ☐ Prescribed medical supplies such as glucose and blood-pressure monitoring equipment ☐ Soap and water, or alcohol-based hand wash ☐ Medicines for fever, such as acetaminophen or ibuprofen □ Thermometer □ Anti-diarrheal medication ■ Vitamins ☐ Fluids with electrolytes ☐ Cleansing agent/soap ☐ Flashlight □ Batteries □ Portable radio ■ Manual can opener ☐ Garbage bags

☐ Tissues, toilet paper, disposable diapers

Child Care and Preschool Pandemic Influenza Planning Checklist

The Child Care and Preschool Pandemic Influenza Planning Checklist is also available for download in PDF format.

En Español

Documents in PDF format require the <u>Adobe Acrobat Reader®</u>. If you experience problems with PDF documents, please <u>download the latest version of the Reader®</u>.

A pandemic is a global disease outbreak. A flu pandemic occurs when a new influenza virus emerges that people have little or no immunity to and for which there may be no vaccine. The disease spreads easily person-to-person and causes serious illness. It can sweep across the country and around the world very quickly. It is hard to predict when the next flu pandemic will occur or how bad it will be.

Child care and preschool programs can help protect the health of their staff and the children and families they serve. Interruptions in child care services during an influenza (flu) pandemic may cause conflicts for working parents that could result in high absenteeism in workplaces. Some of that absenteeism could be expected to affect personnel and workplaces that are critical to the emergency response system. The U.S. Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) offer this checklist to help programs prepare for the effects of a flu pandemic. Many of these steps can also help in other types of emergencies. More information on pandemic flu is available at www.pandemicflu.gov.

Checklist Sections

- Planning and Coordination
- Student Learning and Program Operations
- Infection Control Policies and Actions
- Communications Planning

1. Planning and Coordination:

	Tasks	Not Started	In Progress	Completed
•	Form a committee of staff members and parents to produce a plan for dealing with a flu pandemic. Include members from all different groups your program serves. Include parents who do not speak English who can help contact other non-English speakers in the community. Staff of very small programs might consider joining together with other similar programs for planning.	C	C	C

•	Assign one person to identify reliable sources of information and watch for public health warnings about flu, school closings, and other actions taken to prevent the spread of flu.	C	С	С
•	Learn who in your area has legal authority to close child care programs if there is a flu emergency.	C	C	C
•	Learn whether the local/state health departments and agencies that regulate child care have plans. Be sure your flu plan is in line with their plans. Tell them if you can help support your community's plan.	С	С	С
•	Identify all the ways a flu pandemic might affect your program and develop a plan of action. (For example, you might have problems with food service, transportation, or staffing.)	C	C	C
•	Encourage parents to have a "Plan B" for finding care for their children if the program is closed during a flu pandemic. Give them ideas about where they might seek help based on your knowledge of the local child care community.	C	C	C
•	Work with those in charge of your community's plan to find other sources of meals for low-income children who receive subsidized meals while in your care. (For example, locate food pantries and meals on wheels.)		C	С
•	Learn about services in your area that can help your staff, children, and their families deal with stress and other problems caused by a flu pandemic.	C	С	С
•	Stage a drill to test your plan and then improve it as needed. Repeat the drill from time to time. Consider volunteering to help in tests of community plans.	C	C	C
•	Talk to other child care and preschool programs in your area to share information that could make your plan better. Discuss ways programs could work together to produce a stronger plan and pool resources.	C	С	С

tο	n	Ωf	page	٥

	2.	Student	Learning	and	Program	Operations
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hand plenty of soap, paper towels, and tissues.) Store

		I		
	Tasks	Not Started	In Progress	Completed
•	Plan how you would deal with program closings, staff absences, and gaps in student learning that could occur during a flu pandemic.		C	C
•	Plan ways to help families continue their child's learning if your child care program or preschool is closed. (For example, give parents things they can teach at home. Tell them how to find ideas on the internet. Talk with child care resource referral agencies or other groups that could help parents continue their children's learning at home.)		C	С
•	Plan ways to continue basic functions if your program is closed. (For example, continue meeting payroll and keeping in touch with staff and student's families.)	С	С	C
_	nfection Control Policies and Actions:			
	Tasks	Not Started	In Progress	Completed
•	Give special attention to teaching staff, children, and their parents on how to limit the spread of infection. (For example, use good hand washing; cover the mouth when coughing or sneezing; clean toys frequently.) Programs should already be teaching these things to build habits that protect children from disease. (See www.cdc.gov/flu/school/ and www.healthykids.us/cleanliness.htm .)			
•	Keep a good supply of things you will need to help control the spread of infection. (For example, keep on			C

	the supplies in easy-to-find places.			
•	Tell families that experts recommend yearly flu shots for all children 6 months to 5 years old and for anyone who cares of children in that age range.(See www.cdc.gov/od/oc/media/pressrel/r060223.htm .)	C	С	C
•	Encourage staff to get flu shots each year. (See www.cdc.gov/flu/protect/preventing.htm .)	C	С	C
•	Tell parents to let your program know if their children are sick. Keep accurate records of when children or staff are absent. Include a record of the kind of illness that caused the absence (e.g., diarrhea/vomiting, coughing/breathing problems, rash, or other). (See http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter_3.xml .)		C	C
•	Teach staff a standard set of steps for checking children and adults each day as they arrive to see if they are sick. Make it clear that any child or adult who is ill will not be admitted. (See www.healthykids.us/chapters/sick_main.htm .)	C	C	С
•	Have a plan for keeping children who become sick at your program away from other children until the family arrives, such as a fixed place for a sick room. (See http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter 3.xml .)	C	C	C
•	Require staff members to stay home if they think they might be sick. If they become sick while at the program, require them to go home and stay home. Give staff paid sick leave so they can stay home without losing wages.	C	С	С
•	Require ill staff and students to stay at home until their flu symptoms are gone and they feel ready to come back to work.	C	C	C
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4. Communications Planning:

Tasks	Not Started	In Progress	Completed
 Have a plan for keeping in touch with staff members and students' families. Include several different methods of contacting them. (For example, you might use hotlines, telephone trees, text messaging, special Websites, local radio and/or TV stations.) Test the contact methods often to be sure they work. 	C		C
 Make sure staff and families have seen and understand your flu pandemic plan. Explain why you need to have a plan. Give them a chance to ask questions. 	С	C	С

- Give staff and students' families reliable information on the issues listed below in their languages and at their reading levels.
 - How to help control the spread of flu by hand washing/cleansing and covering the mouth when coughing or sneezing. (See www.cdc.gov/flu/school/.)
 - How to recognize a person that may have the flu, and what to do if they think they have the flu. (See www.pandemicflu.gov.)
 - How to care for ill family members. (See www.hhs.gov/pandemicflu/plan/sup5.html#box4.
 - How to develop a family plan for dealing with a flu pandemic. (See www.pandemicflu.gov/planguide/.)

School District (K-12) Pandemic Influenza Planning Checklist

The School District (K-12) Pandemic Influenza Planning Checklist is also available for download in <u>PDF format</u>.

En Español

Documents in PDF format require the <u>Adobe Acrobat Reader®</u>. If you experience problems with PDF documents, please <u>download the latest version of the Reader®</u>.

Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (<u>Practical Information on Crisis Planning: A Guide For Schools and Communities (PDF)</u> (1.56MB). Further information on pandemic influenza can be found at www.pandemicflu.gov.

Checklist Sections

- Planning and Coordination
- <u>Continuity of Student Learning and Core</u>
 <u>Operations</u>
- Infection Control Policies and Procedures
- Communications Planning

1. Planning and Coordination:

	Tasks	Not Started	In Progress	Completed
•	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.			
•	Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation.	C	С	С

	quarantine, movement restriction, healthcare services, emergency care, and mutual aid.			
•	As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district's operational pandemic plan.			
•	Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district's pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district's established ICS and the local/state health department's and state education department's ICS.	C	C	C
•	Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.	C	С	С
•	Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community's pandemic plan as well as the state department of education's plan.	C	C	C
•	Test the linkages between the district's Incident Command System and the local/state health department's and state education department's Incident Command System.	C	C	C
•	Contribute to the local health department's operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's healthcare and mental health staff). In an affected community,	C	C	С

	at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.			
•	Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language.	C	C	C
•	Participate in exercises of the community's pandemic plan.	C	C	C
•	Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic.	0	C	C
•	Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.	С	С	С
•	Implement an exercise/drill to test your pandemic plan and revise it periodically	E	C	C
•	Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.	С	С	С
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2. (Continuity of Student Learning and Core Operati	ons:		
	Tasks	Not Started	In Progress	Completed
•	Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.	С	С	C
•	Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television	C	C	C

	stations) in the event of district school closures.			
•	Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.	C	С	С
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3.	Infection Control Policies and Procedures:			
	Tasks	Not Started	In Progress	Completed
•	Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.	C	C	С
•	Provide sufficient and accessible infection prevention supplies (e.g., soap, alcoholbased/waterless hand hygiene products, tissues and receptacles for their disposal).	С	С	С
•	Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).	C	C	С
•	Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.	E	С	С
•	Establish policies for transporting ill students.		C	
•	Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan/sup4.html).	C	C	C

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4. Communications Planning:

	Tasks	Not Started	In Progress	Completed
•	Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.			
•	Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.	С	C	С
•	Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities.	C		C
•	Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.	С	С	С
•	Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.	C	C	C
•	Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.	C	C	C
•	Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.	C		C
•	Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).	C	C	C
•	Disseminate information from public health			

sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).

 Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly. 	С	С	С
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http://www.pandemicflu.gov/plan/school/schoolchecklist.html